

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		71530	1/23
O.I.P.E. CLASSIFIER		15	2-9-00
FORMALITY REVIEW	CM	71632	2/14/00
RESPONSE FORMALITY REVIEW	CM	71632	4-25-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	1/23/00
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10	✓
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy